Attorney Docket No. 5998-0507PUS4

BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: P.O. Box 747 • Falls Church, Virginia 22040-0747
YOU MUST Telephone: (703) 205-8000 • Facsimile: (703) 205-8050
COMPLETE THE

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

Insert Title:	next to my name; that I ver below) or an original, first claimed and for which a pa ADDITIONAL HETEROPO RECEPTOR ANTAGONIST		inal, first and sole inven inventors are named belon entitled: AND THEIR USE AS	etor (if only one i ow) of the subject	nventor is it matter w	named which is
	the specification of which : docket number as set forth :	is attached hereto. If not atta above and/or the following:	sched hereto, the applica	ation is identifie	d by the a	ttorney
Fill in Appropriate Information –	The specification was filed	on <u>08/08/2006</u> as U	Inited States Application	Number		;
For Use Without	and amended on	(if applicable)				
Specification	the specification was filed or	02/15/2005 as PCT	International Application	Number PCT/	US2005/0	04774 ;
Insert Priority	claims, as amended by any an l acknowledge the duty Federal Regulations, §1.56. I do not know and do to our invention thereof, or pa thereof or more than one ye an inventor's certificate issue on an application filed by m prior to this application, and country foreign to the Unite except as follows. I hereby claim foreign a for patent or inventor's err	v to disclose information which to believe the same was ever tented or described in any pri prior to this application, that are prior to this application, the property of the presentative or my legal representative to that no application for patent of States of America prior to the original property of the property o	the contents of the above-keth is material to patentable known or used in the United publication in any of the same was not in publication and the invention has not be cation in any country fore wassigns more than tweel or is explication by me or I be up to the publication of the publication of the united States Code, \$115 also identified below an also identified below and	illty as defined in titted States of Am country before my ic use or on sale it is earn patented or neight to the United we months (six my legal represen my legal represen per of the United States of	erica before y or our in the Unite made the su States of Aconths for cast been filed the su tatives or eign applies	Code of e my or evention d States abject of America designs) d in any assigns, ration(s) atent or
(if appropriate)						
	(Number)	(Country)	(Month/Day)	/Year Filed)	Yes	No
	(Number)	(Country)	(Month/Day)	/Year Filed)	Yes	No
	(Number) I hereby claim the benefit u listed below.	(Country) nder Title 35, United States C	(Month/Day/ ode, §119(e) of any Unite		Yes nal applica	No ations(s)
Insert Provisional	60/608,96	50		bruary 18, 2004		
Application(s): (if any)	(Application Number)		(Filing Date)			
	(Application Number)		(Filing Date)			
	All Foreign Applications, if Designs) Prior to the Filing D	any, for any Patent or Inver-	ntor's Certificate Filed Mo	ore than 12 Mon	ths (6 Mor	aths for
Insert Requested Information (if appropriate)			on Number D	ate of Filing (Mo	nth/Day/	Year)
Insert Prior U.S.	including for continuation in this application is not disclo- paragraph of Title 35, United patentability as defined in Ti	nder Title 35, United States of part application(s) listed belo- sed in the prior United States States Code, §112, I acknowl- tle 37, Code of Federal Regulat the national or PCT international	w and, insofar as the sub and/or PCT application i edge the duty to disclose i ions, §1.56 which became	oject matter of eac in the manner pro information which available between	th of the cl ovided by n is materia	laims of the first al to the
Application(s): (if any)	(Application Number)	(Filing Date)	(Status -	- patented, pend	ing, aband	oned)
	(Application Number)	(Filing Date)	(Status -	patented, pend	ing, aband	loned)

Birch, Stewart, Kolasch & Birch, LLP

FOLLOWING

I hereby appoint the practitioners at CUSTOMER NO. 54880 as my attorneys or agents to prosecute this application and/or an international application absed on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

CUSTOMER NO. 54080; (BIRCH, STEWART, KOLASCH & BIRCH, LLP) Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:	I hereby declare that all statements made her on information and belief are believed to be true; that willful false statements and the like so made 1001 of Title 18 of the United States Code and the application or any patent issued thereon.	and further that these statements e are punishable by fine or impris	were made w	vith the knowledge
Full Name of First or Sole Inventor. Insert Name of Inventor → Insert Date This	GIVEN NAME/FAMILY NAME Louise EDWARDS	INVENTOR'S SIGNATURE		DATE*
Document is Signed Insert Residence Insert Citizenship →	Residence (City, State & Country) Toronto, Canada	-	CITIZENS	-IIP Canada
Insert Post Office Address	MAILING ADDRESS (Complete Street Address c/o NPS Allelix Corp.; 101 College Street, 8th Flo	including City, State & Country) oor; Toronto, Ontario M5G 1L8; C	CANADA	
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Methvin ISAAC	INVENTOR'S SIGNATURE		DATE*
	Residence (City, State & Country) Brampton, Canada		CITIZENSI	-IIP Canada
	MAILING ADDRESS (Complete Street Address c/o NPS Allelix Corp.; 101 College Street, 8th Flo	including City, State & Country) oor, Toronto, Ontario M5G 1L8; C	CANADA	
Full Name of Third Inventor, If any see above	GIVEN NAME/FAMILY NAME Martin JOHANSSON	INVENTOR'S SIGNATURE		DATE*
	Residence (City, State & Country) Södertälje, Sweden		CITIZENSI	HIP Sweden
	MAILING ADDRESS (Complete Street Address c/o AstraZeneca R&D Södertälje; SE-151 85 Söde	including City, State & Country) ertälje; SWEDEN	-	
Full Name of Fourth Inventor, If any see above	GIVEN NAME/FAMILY NAME Annika KERS	INVENTOR'S SIGNATURE		DATE*
	Residence (City, State & Country) Sodertalje, Sweden		CITIZENSI	-IIP Sweden
	MAILING ADDRESS (Complete Street Address c/o AstraZeneca R&D Södertälje; SE-151 85 Söde	including City, State & Country) ertälje; SWEDEN		
Full Name of Fifth Inventor, if any see above	GIVEN NAME/FAMILY NAME Johan MALMBERG	INVENTOR'S SIGNATURE		DATE*
	Residence (City, State & Country) Södertälje, Sweden	<u> </u>	CITIZENSI	HP Sweden
	MAILING ADDRESS (Complete Street Address c/o AstraZeneca R&D Södertälje; SE-151 85 Söde	including City, State & Country) ertälje; SWEDEN		
Full Name of Sixth. Inventor, if any see above	GIVEN NAME/FAMILY NAME Donald MCLEOD	And Oli MS	360	DATE*
	Residence (City, State & Country) Salt Lake City, Utah		CITIZENSI	
	MAILING ADDRESS (Complete Street Address c/o NPS Pharmaceuticals, Inc.; 383 Colorow Driv	including City, State & Country) ve; Salt Lake City, Utah 84108		

Inventor, if any	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if any. ees above	Alexander MINIDIS				
	Residence (City, State & Country)		CITIZENS	SHIP	
	Södertälje, Sweden			Sweden	
	MAILING ADDRESS (Complete Street Address	including City, State & Country)			
	c/o AstraZeneca R&D Södertälje; SE-151 85 Söd	ertälje; SWEDEN			
Full Name of Hight	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if any	Karin STAAF				
	Residence (City, State & Country)		CITIZENS	SHIP	
	Södertälje, Sweden			Sweden	
	MAILING ADDRESS (Complete Street Address	including City, State & Country)			
	c/o AstraZeneca R&D Södertälje; SE-151 85 Söd	ertălje; SWEDEN			
Full Name of Ninth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if any see above	Abdelmalik SLASSI				
	Residence (City, State & Country)		CITIZENS	HIP	
	Mississauga, Canada			Canada	
	MAILING ADDRESS (Complete Street Address	including City, State & Country)	L		
	c/o NPS Allelix Corp.; 101 College Street, 8th Fl	oor; Toronto, Ontario M5G 1L8; 0	CANADA		
Full Name of Tenth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if any: see above	Tomislav STEFANAC				
	Residence (City, State & Country)		CITIZENS	HIP	
	Burlington, Canada			Canada	
	MAILING ADDRESS (Complete Street Address	including City, State & Country)			
	c/o NPS Allelix Corp.; 101 College Street, 8th Fl	oor: Toronto Ontorio MEC 11 9:0	CANIADA		
	C/ O 141 5 Allenx Corp., 101 College Street, atti Fi				
Full Name of	GIVEN NAME/FAMILY NAME		ANADA	DATE*	
Eleventh Inventor, if any	GIVEN NAME/FAMILY NAME	INVENTORS SIGNATURE		DATE*	2006
Eleventh		INVENTOR'S SIGNATURE		Sept. 7,	2006
Eleventh Inventor, if any	GIVEN NAME/FAMILY NAME Thomas M. STORMANN	INVENTORS SIGNATURE	nan	Sept. 7,	2006
Eleventh Inventor, if any	GIVEN NAME/FAMILY NAME Thomas M. STORMANN Residence (City, State & Country)	INVENTORS SIGNATURE	nan	Sept. 7,	2006
Eleventh Inventor, if any	GIVEN NAME / FAMILY NAME Thomas M. STORMANN Residence (City, State & Country) Salt Lake City, Utah	INVENTOR'S SIGNATURE HAMMAR STORM including City, State & Country)	nan	Sept. 7,	2006
Eleventh Inventor, if any one above	GIVEN NAME/FAMILY NAME Thomas M. STORMANN Residence (City, State & Country) Salt Lake City, Utah MAILING ADDRESS (Complete Street Address	INVENTOR'S SIGNATURE HAMMAR STORM including City, State & Country)	nan	Sept. 7,	2006
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Full Name of Fourteenth Inventor, if anysee above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jalaj ARORA		
Residence (City, State & Country)		CITIZENSHIP
Milton, Canada		Canada

Attorney Docket No. 5998-0507PUS4

(Status - patented, pending, abandoned)

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BIRCH, STEWART, KOLASCH & BIRCH, LLP

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COMBINED DECLARATION AND POWER OF ATTORNEY

		DECEMBER AND	FOWER OF ATTORNEY	
	FOR:	PATENT AND DESIGN	APPLICATIONS	
Insert Title:	below) or an original claimed and for whic ADDITIONAL HETI RECEPTOR ANTAG the specification of w	I, first and joint inventor (if plural in the a patent is sought on the invention EROPOLYCYCLIC COMPOUNDS A ONISTS	sidence, post office address and citizen al, first and sole inventor (if only one i ventors are named below) of the subjec entitled: NND THEIR USE AS METABOTROP! thed hereto, the application is identified	nventor is named et matter which is C GLUTAMATE
Fill in Appropria	te The specification was	forth above and/or the following:	appleadon is identified	a by the attorney
Information -	and amended on	med on08/08/2006 as Uni	ited States Application Number	;
For Use Withou Specification		iled on 02/15/2005 as PCT in	national Application Number PCT/	
Attached: Insert Priority Information (if appropriate)	I hereby state that claims, as amended by I acknowledge the Federal Regulations, \$1 I do not know an our invention thereof, thereof or more than on an inventor's certificate on an application filed priot to this application country foreign to the except as follows. I hereby claim for pasted to invested the control of the country foreign to the formatter than the country foreign to the care the country foreign to the care the country foreign to the care that the country foreign to the care that the country foreign to the care that the country foreign the country foreign the care that	It have reviewed and under it applies to the common any amendment referred to about the any amendment referred to about the any amendment referred to about the do not believe the same was ever ke do not believe the same was ever ke do not believe the same was ever ke to the common that	able) contents of the above-identified specificate contents of the above-identified specificate is material to patentability as defined in own or used in the United States of Ame of publication in any country before my many control of the content of the invention has problemed to the limited on in any country foreign in the United issigns more than twelve months (six many properties of the invention for the content of the content of the control of the content of the	tion, including the Title 37, Code of erica before my or or our invention the United States ade the subject of States of America onths for designs) to been filled in any attives or assigns,
	(Transper)	(Country)	(Month/Day/Year Filed)	Yes No
	(Number)	(Country)	March De Over 1911 II	
	I hereby claim the bene	fit under Title 35, United States Code	(Month/Day/Year Filed) , §119(e) of any United States provisiona	Yes No
Insert Provisional		08,960		n applications(s)
Application(s): (if any)	(Application Number)		Filing Date) February 18, 2004	
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	(Application Number)		Filing Date)	
Insert Requested	All Foreign Application Designs) Prior to the Filis Country		s Certificate Filed More than 12 Months	s (6 Months for
Information (if appropriate)		Application N	Number Date of Filing (Mont	h/Day/Year)
Insert Prior U.S.	this application is not di paragraph of Title 35, Ur patentability as defined in	sclosed in the prior United States and, uited States Code, §112, I acknowledge n Title 37, Code of Federal Regulations, and the national or PCT international fili	, \$120 of any United States and/or PCI nd, insofar as the subject matter of each for PCT application in the manner provi- the duty to disclose information which is \$1.56 which became available between ug date of this application.	of the claims of ided by the first
(manty)		(Filing Date)	(Status - patented, pending	, abandoned)
	(Application Number)	(Filing Date)	(Chatana and a second	

(Rev. 05/2004)

Birch Stewart Kolasch & Birch LLD

(Filing Date)

I hereby appoint the practitioners at CUSTOMER NO. 54080 as my attorneys or agents to reliefly appoint the practitioners at COSIAMER NO. 34000 as my attorneys or agents to a consistent material application and/or an international application based on this application and to massistent in the United States Patent and Irademark Office connected therewith and in connection inconnection and the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

CUSTOMER NO. 54080; (BIRCH, STEWART, KOLASCH & BIRCH, LLP) Telephone. (703) 205-8000 • Facsimile: (703) 205-8050

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Full Name of First or Sole Inventor Insert Name of Inventor Insert Date This	GIVEN NAME/FAMILY NAME Louise EDWARDS	INVENTOR'S SIGNATURE	DATE*
Document is Signed Insert Residence	Residence (City, State & Country) Toronto, Canada		CITIZENSHIP
Insert Post Office Address →	MAILING ADDRESS (Complete Street Address c/o NPS Allelix Corp.; 101 College Street, 8th Flo	including City, State & Country) oor, Toronto, Ontario M5G 1L8;	Canada CANADA
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Methvin ISAAC	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Brampton, Canada MAILING ADDRESS (Complete Street Address	including City Cut A C	CITIZENSHIP Canada
	C/O NFS Allenx Corp.; 101 College Street, 8th Fig	por; Toronto, Ontario M5G 1L8; (CANADA
Full Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME Martin JOHANSSON	INVENTOR'S SIGNATURE	DATE* 4/4 - 200C
	Residence (City, State & Country) Lund, Sweden MAILING ADDRESS (Complete State Address)	V 1/2	CITIZENSHIP Sweden
	MAILING ADDRESS (Complete Street Address i c/o Respiratorius, Magistratsvägen 10, SE-226 43	including City, State & Country) Lund, Sweden	
ull Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME Annika KERS	INVENTOR'S SIGNATURE	DATE 12/9-2016
	Residence (City, State & Country) Sodertalje, Sweden		CITIZENSHIP Sweden
	MAILING ADDRESS (Complete Street Address i c/o AstraZeneca R&D Södertälje; SE-151 85 Söde	ncIuding City, State & Country) rtälje; SWEDEN	oweda.
uli Name of Fifth Inventor, if any: see above	Johan MALMBERG	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) Södertälje, Sweden		CITIZENSHIP Sweden
	MAILING ADDRESS (Complete Street Address ir c/o AstraZeneca R&D Södertälje; SE-151 85 Söder	ncluding City, State & Country) rtälje; SWEDEN	Sweden
ill Name of Sixth nventor, if any; see above	GIVEN NAME/FAMILY NAME Donald MCLEOD	INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country) SaIt Lake City, Utah		CITIZENSHIP US
	MAILING ADDRESS (Complete Street Address in c/o NPS Pharmaceuticals, Inc.; 383 Colorow Drive	cluding City, State & Country) e; Salt Lake City, Utah 84108	0.5

Full Name of Seven	GIVEN NAME/FAMILY NAME	Township of	
Inventor, if any: see abo		INVESTION'S SIGNATURE	DATE*
	Residence (City, State & Country)	1 GUOON /C	Sept "1 200
	Södertälje, Sweden		CITIZENSHIP
	MAILING ADDRESS (Complete Street Addre	and the Property of the Control of t	Sweden
	c/o AstraZeneca R&D Södertälje; SE-151 85 S	ss including City, State & Country) ödertälje, SWEDEN	
Full Name of Eight Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
see abov	Karin STAAF	Lun Stoat	
	Residence (City, State & Country)	1 1000	Sept 12 th, 20
	Södertälje, Sweden		
	MAILING ADDRESS (Complete Street Address	ss including City State & Country	Sweden
	c/o AstraZeneca R&D Södertälje; SE-151 85 Sö	dertälie: SWEDEN	
Full Name of Ninth	GIVEN NAME/FAMILY NAME		
Inventor, if any: see above		INVENTOR'S SIGNATURE	DATE*
	Residence (City, State & Country)		- Communication of the Communi
	Mississauga, Canada		CITIZENSHIP
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Inventor, if any: see above	Tao XIN		DATE*
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Attorney Docket No. 5998-0507PUS4

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 FOLLOWING
 Following

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

Insert Title:	As a below named inventor, next to my name; that I veribelow) or an original, first a claimed and for which a path ADDITIONAL HETEROPO RECEPTOR ANTAGONISTS the specification of which is docket number as set forth a	ly believe that I am the nd joint inventor (if pent is sought on the in- LYCYCLIC COMPOL is attached hereto. If n	e original, first and so lural inventors are na vention entitled: JNDS AND THEIR U ot attached hereto, th	le inventor (if only one med below) of the subj JSE AS METABOTRO	e inventor is named lect matter which is PIC GLUTAMATE
Fill in Appropriate Information -	The specification was filed o	n08/08/2006	as United States App	plication Number	
	and amended on	(if appli	cable) and/or		
For Use Without Specification	the specification was filed on	02/15/2005 a	s PCT International Ap	plication Number PCI	/US2005/004774
Attached:	and was amended on I hereby state that I have claims, as amended by any am claims, as a mended by any am claims, as a mended by any amended by a mended by a mende	reviewed and underst endment referred to ab to disclose information to believe the same was ented or described in a prior to this application ar prior to this application to rny legal represent, hat no application for p States of America pric riority benefits under T liciate listed below and	ove. n which is material to sever known or used it my printed publication n, that the same was no ion, that the invention it application in any countries atterned to this application between the this application by the same and the same also identified the same also identified these also identified the same was not application.	patentability as defined in the United States of A in any country before it in public use or on sale has not been patented or mtry foreign to the Unit han twelve months (six fifeate on this invention y me or my legal repres ode, §119(a)-(d) of any fr selow any foreign appli by priority is claimed:	in Title 37, Code of merica before my or our inventior in the United States made the subject of America months for designs has been filled in any entatives or assigns oreign application(section for patent of the state of the s
T	Prior Foreign Application	1(S)		F	riority Claimed
Insert Priority Information (if appropriate)	(Number)	(Country)	(Mon	th/Day/Year Filed)	Yes No
	(Number)	(Country)	(Mon	th/Day/Year Filed)	Yes No
	(Number)	(Country)	(Mon	th/Day/Year Filed)	Yes No
	(Number)	(Country)	(Mon	th/Day/Year Filed)	Yes No
	I hereby claim the benefit un listed below.	der Title 35, United St			
Insert Provisional Application(s):	00/000,70)		February 18, 2004	
(if any)	(Application Number)		(Filing Date)		
	(Application Number)		(Filing Date)		
	All Foreign Applications, if Designs) Prior to the Filing Da	any, for any Patent or te of This Application:	Inventor's Certificate	Filed More than 12 Mo	onths (6 Months fo
Insert Requested Information (if appropriate)	Country	Apı	plication Number	Date of Filing (N	fonth/Day/Year)
Insert Prior U.S.	I hereby claim the benefit ur including for continuation-in- this application is not disclos paragraph of Title 35, United patentability as defined in Titl of the prior application and the	part application(s) liste ed in the prior United : States Code, §112, I ac le 37, Code of Federal R	d below and, insofar a States and/or PCT app knowledge the duty to egulations, §1.56 which	s the subject matter of e dication in the manner p disclose information wh became available betw	each of the claims o provided by the firs ich is material to the
Application(s): (if any)	(Application Number)	(Filing	Date)	(Status - patented, per	ding, abandoned)
	(Application Number)	(Filing	Date)	(Status - patented, per	nding, abandoned)

(Rev. 05/2004) Birch, Stewart, Kolasch & Birch, LLP Page 1 of 4

ADM/sns

I hereby appoint the practitioners at CUSTOMER NO. \$4980 as my attorneys or agents to prosecute this application and/or an international application hased on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

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CUSTOMER NO. 54080; (BIRCH, STEWART, KOLASCH & BIRCH, LLP) Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

E I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonance, or both, under 500, 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

or Sole Inventor Insert Name of Inventor Insert Date This Document is Signed	GIVEN NAME/FAMILY NAME Louise EDWARDS	INVENTOR'S SIGNATURE	DATE* Aug 30/06
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Fall Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Methvin ISAAC	INVENTORESIGNATURE	Sept 11/CE
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Fuil Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME Annika KERS	INVENTOR'S SIGNATURE	DATE*
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Fuli Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME Donald MCLEOD	INVENTOR'S SIGNATURE	DATE*
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Inventor, if any: see above	Karin STA AF			
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Inventor, if any: see above	Tomislav STEFANAC	Homislan Delan	Aug.392	2006
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Full Name of Eleventh			CANADA DATE*	
Full Name of Eleventh Inventor, if any: see above	c/o NPS Allelix Corp.; 101 College Street, 8th Fl	oor; Toronto, Ontario M5G 1L8; 0		
Eleventh Inventor, if any:	c/o NPS Allelix Corp.; 101 College Street, 8th Fl GIVEN NAME/FAMILY NAME	oor; Toronto, Ontario M5G 1L8; 0		
Eleventh Inventor, if any:	c/o NPS Allelix Corp.; 101 College Street, 8th Fl GIVEN NAME/FAMILY NAME Thomas M. STORMANN	oor; Toronto, Ontario M5G 1L8; 0	DATE*	
Eleventh Inventor, if any:	c/o NPS Alleix Corp.; 101 College Street, 8th Fl GIVEN NAME/FAMILY NAME Thomas M. STORMANN Residence (City, State & Country)	oor; Toronto, Ontario M5G 1L8; (DATE*	
Eleventh Inventor, if any:	c/o NPS Allelix Corp.; 101 College Street, 8th Fl GIVEN NAME/FAMILY NAME Thomas M. STORMANN Residence (City, State & Country) Salt Lake City, Utah MAILING ADDESS (Complete Street Address c/o NPS Pharmaceuticals, Inc.; 383 Colorow Dri	oor; Toronto, Ontario M5G 1L8; (INVENTOR'S SIGNATURE including City, State & Country)	DATE*	
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